

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: F. Ménard

Application No.: 09/154,431

Group Art Unit: 2663

Filed: September 16, 1998

Examiner: D. Duong

For: APPARATUS AND METHOD TO USE A CONVENTIONAL TELEPHONE SET TO
MAKE TELEPHONE CALLS ON A PACKET NETWORK

RESPONSE TO OFFICE ACTION AND EXAMINER INTERVIEW

Mail Stop Amendment
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

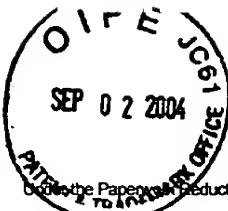
Sir:

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In response to the Examiner's Office Action dated May 6, 2004 and the Examiner
Interview of September 1, 2004, kindly cancel claim 13 and amend claim 11 as indicated below.



2663

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PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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(to be used for all correspondence after initial filing)

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| | | Application Number | 09/154,431 |
| | | Filing Date | September 16, 1998 |
| | | First Named Inventor | F. Ménard |
| | | Art Unit | 2663 |
| | | Examiner Name | D. Duong |
| Total Number of Pages in This Submission | 19 | Attorney Docket Number | 20014.0002 |

ENCLOSURES (check all that apply)

| | | |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| | | Remarks |

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|---|
| Firm or Individual name | Swidler Berlin Shereff Friedman, LLP Sean P. O'Hanlon, Reg. No. 47,252 |
| Signature |  |
| Date | September 2, 2004 |

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